



MENTAL HEALTH REFORM

Tasks and Outcomes
2001 to 2005

North Carolina Department of Health and Human Services

**Division of Mental Health, Developmental Disabilities,
and Substance Abuse Services**

STATUS OF TASKS FROM PRIOR STATE PLANS

This document lists the detailed tasks from each of the five State Plans and the status of each, with explanation if necessary. Status is indicated as either completed, partially completed, to be done, or deleted. Note that tasks indicated as “completed” indicates that it was completed for that fiscal year and does not indicate it would not be undertaken at another time. Tasks that are “deleted” are either not appropriate as a task of implementation of the reformed system or tasks that are beyond the control of the Division. Such tasks may be appropriate as goals for the operating system once it is fully implemented.

#	State Plan 2005 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
1	Continue to implement information sessions with the leadership of key state agencies and associations to discuss issues related to transformation of the mh/dd/sa system		1 - Completed	
2	Develop outline for the local business plan		1 - Completed	
3	Develop succession plan for continued leadership in the state operated facilities		2 - Partially Completed	Several unexpected vacancies have made this task more critical and more difficult.
4	Develop succession plan for continued leadership at the division's central office		2 - Partially complete	Division is participating in DHHS succession planning activities.
5	Develop and implement memoranda of agreement describing relationships between the division and other state agencies		1 - Completed	
6	Develop a long range plan for addressing the mental health, developmental disabilities, and substance abuse services needs of the state		1 - Completed	Recommendations from the Long-Range Plan Report are under review by the Division.
7	Develop finance strategy		1 - Completed	Recommendations in the Funding Allocation Report are under review by the Division.
8	Develop and re-evaluate rates		1 - Completed	Recommendations in the Funding Allocation Report are under review by the Division.
9	Develop strategic plan for resource development		1 - Completed	Recommendations in the Funding Allocation Report are under review by the Division.
10	Submit self directed services and supports waiver for persons with developmental disabilities to the federal Centers for Medicare and Medicaid services (CMS)		2 - Partially Completed	DMH/DD/SAS has completed draft waiver. Currently pending approval at DMA. Concerns at DMA that implementation may have to be delayed due to systems constraints until new MMIS system goes on-line.
11	Implement comprehensive prevention plan		2 - Partially Completed	Division successfully applied for and received a federal Prevention Strategic Infrastructure Grant (P-SIG) which is informing this activity.
12	Implementation and evolution of child mental health plan		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2005 Tasks			
13	Continue to offer technical assistance on community capacity functions of the LME		1 - Completed	
14	Continue initiative pertaining to traumatic brain injury		1 - Completed	
15	Evaluate the availability and access to medications for persons served by the mh/dd/sa system		2 - Partially Completed	Working to establish better pharmaceutical access.
16	Develop best practice for self-directed services		1 - Completed	
17	Successfully implement all new services including those in the new CAP-MR/DD waiver		1 - Completed	
18	Utilization review implementation		2 - Partially Completed	Authorization guidelines for state funded services to be finalized during first quarter of SFY 2007.
19	Develop three region concept		1 - Completed	
20	Enhance collection of data on consumer outcomes and experiences		2 - Partially Completed	Completed for MH and SA populations; to be completed for DD population in SFY 2007.
21	Develop provider reports		2 - Partially Completed	Will be completed in SFY 2007.
22	Address homelessness		2 - Partially Completed	This is an on-going effort.
23	Study and re-evaluate service definitions		1 - Completed	
24	Initiate transition to new service expectations		1 - Completed	
25	Implement the recommendations of the cultural competency advisory group		2 - Partially Completed	To be finalized and implemented in the first quarter of SFY 2007.
26	Publish state plan 2006		1 - Completed	

#	State Plan 2005 Tasks	Section of Session Law 2001-437	Status:	Outcome
			1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	
27	Develop new or modify existing rules and statutes that reflect MH/DD/SAS reform		2 - Partially Completed	This is a work in-progress with the Commission for MH/DD/SAS. All rules that need to be deleted have been identified and revised rules are in progress.
28	Oversee key components in the development of the new hospital at Butner		2 - Partially Completed	Hospital Steering Committee continues to monitor this activity.
29	Continue quality improvement initiatives for the mh/dd/sa services system		2- Partially complete	Ongoing activity.
30	Continue to develop policies of state operated facilities wherever possible to consolidate for uniformity the operations of the state service delivery system		2 - Partially Completed	State Operated Services continues to work on this project.
31	Implement the strengthening and enhancement of the division's accountability efforts		2 - Partially Completed	
32	Develop performance measures around the functional efforts of CFACS		2 - Partially Completed	Advocacy and Customer Services are working with CFACs on this project.
33	Develop and implement strategies for training and workforce development		2 - Partially Completed	
34	Continue housing initiatives for persons served by the MH/DD/SAS system		2 - Partially Completed	Ongoing activity.
35	Advance the opportunities for people with disabilities and their families to influence the full range of the system		2 - Partially Completed	Continue to work to increase consumer and family participation.

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2004 Tasks			
1	Continue to advance the public policy relationship between the state and its local partners through the on-going work of public partners policy group		1 - Completed	
2	Develop a cultural competency and awareness plan for the Division, LMEs, providers and partners		2 - Partially Completed	The plan has been completed in draft and disseminated for comments. It will be finalized and implemented in the first quarter of SFY 2007.
3	Publish State Plan 2005		1 - Completed	
4	Advance the awareness of customer service throughout the division to reflect the DHHS secretary's initiative & coordinate efforts with communications and training team to establish training and keep it on-going		1 - Completed	
5	Finalize rates for service		1 - Completed	
6	Continue research, dissemination and implementation of new best practices		1 - Completed	Though this will be an on-going process, the Division has established the Practice Improvement Collaborative (PIC) comprised of academics, researchers, consumers, and clinicians to systematically and routinely consider new and emerging best practices.
7	Develop independence plus waiver		2 - Partially Completed	The waiver has been completed and is awaiting DMA approval. There is some concern on the part of DMA that this waiver cannot be implemented prior to the implementation of NC LEADS.
8	Develop and implement plans and activities that respond to the 2003-2004 recommendations of the commission on MH/DD/SAS task force on housing particularly in the areas of division and LME capacity building and public education		1 - Completed	The Division has implemented the components of the plan that are within its jurisdiction and that are possible within existing resources. Additional funding is required to further implement the plan.
9	Provide technical assistance around natural and community supports for non-target individuals		2 - Partially Completed	Will be finalized as a component of the standardized authorization for state funded services.
10	Oversee implementation of the Piedmont Project		1 - Completed	Ongoing.
11	Implement new CAP-MR/DD waiver		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2004 Tasks			
12	Continue development of the area program/ county program consolidation plan		1 - Completed	
13	Support and serve the target populations and continue to evaluate the target populations to determine necessary adjustments		1 - Completed	
14	Complete comprehensive prevention plan		2 - Partially Completed	Division successfully applied for and received a federal Prevention Strategic Infrastructure Grant (P-SIG) which is informing this activity.
15	Coordinate hospital downsizing		2 - Partially Completed	Demand for hospital services has remained high so downsizing has not proceeded at the pace anticipated. It continues to be a work in progress.
16	Distribute approved service definitions with accompanying provider qualifications and utilization management guidelines		1 - Completed	
17	Develop plan for systems to transition to new support and service expectations		1 - Completed	
18	Implement the Division's workforce development plan		3 - To be done	Communications & Training Team leader position has been vacant for more than a year. Numerous postings have not resulted in an acceptable candidate. We believe we are close to hiring someone and this will be one of their top priorities.
19	Coordinate state developmental centers downsizing		2 - Partially Completed	Downsizing of state developmental centers has not occurred as planned, despite efforts of DMH/DD/SAS
20	Continue implementation of the child mental health plan		1 - Completed	
21	Work with the Division of Medical Assistance to revise the state Medicaid plan to advance reform efforts		1 - Completed	
22	Develop standardized LME-provider contract, utilization management criteria, and billing procedures		2- Partially complete	Contract and billing guidelines have been completed. Standardized authorization guidelines for state funded services will be issued early in SFY 2007.
23	Continue technical assistance in building community capacity for service and service divestiture		1 - Completed	

#	State Plan 2004 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
24	Continue technical assistance and consultation regarding the functions of the LMEs		1 - Completed	
25	Refine the requirements and timelines for accreditation for LMEs		1 - Completed	
26	Refine the requirements and timelines for accreditation for providers		1 - Completed	
27	Develop and implement a plan for expanding community education regarding reform		1 - Completed	
28	Develop quality reports		2 - Partially Completed	Many reports have been developed. Focus in SFY 2007 will be on creating easy to read, visually interesting reports.
29	Provide training for LME staff in customer service and rights protection		4 - Delete	DMH/DD/SAS does not have sufficient staff to perform this function. We have made customer services materials to LME staff development coordinators and encouraged them to use those materials to train their own staff.

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2003 Tasks			
1	Establish departmental project team		1 - Completed	
2	Conduct a comprehensive evaluation of reform		3 - To be done	Working on this prior to the implementation of the new services would have been premature.
3	Develop new or modify existing statutes that reflect mh/dd/sa reform		1 - Completed	Legislation enacted in the 2006 Session.
4	Analyze, establish, or modify rules to reflect service system design		2 - Partially Completed	This is a work in-progress with the Commission for MH/DD/ SAS. All rules that need to be deleted have been identified, however, other more pressing issues such as the Child Residential Rules or actions of the General Assembly requiring rule-making, such as pseudo ephedrine legislation, have prevented staff and the Commission from completing this task.
5	Obtain approvals from commissions, grant authorities, federal agencies		1 - Completed	
6	Develop a comprehensive communication plan		1 - Completed	
7	Develop a training and education plan		2- Partially Completed	Final communication regarding trainings approved to meet requirements of new service definitions issued in June, 2006.
8	Develop area program/county program consolidation plan		1 - Completed	
9	Submit quarterly reports to legislative oversight committee and other legislative reports as required		1 - Completed	
10	Publish draft State Plan 2004		1 - Completed	
11	First level commitment		1 - Completed	
12	Piedmont Project		1 - Completed	
13	Deaf and Hard of Hearing		1 - Completed	
14	Coordinate activities of the Health Information Systems (HIS)		1 - Completed	
15	Coordinate activities of the MMIS plus rebid		1 - Completed	
16	Coordinate activities for HIPAA compliance		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2003 Tasks			
17	Wake County In-patient		4- Delete	DHHS continues to assist Wake County where possible on this issue, but this is a Wake County project.
18	Authorizations by LME's		3 - To be done	Standardized authorization guidelines for state funded services to be issued in the first quarter of SFY 2007.
19	Participation in Guardianship Study		4- Delete	There has not been interest among other agencies to pursue this matter at this time.
20	Coordination with the division stakeholder group and the public policy work group		1 - Completed	
21	Coordinate process to hire a clinical director		1 - Completed	
22	Policy decisions on county funds/MOE		1 - Completed	
23	Policy decisions on Medicaid match		1 - Completed	
24	Establish the long-term financial plan including identification of revenues and transition implementation steps. This also includes the policy decisions regarding local maintenance of effort and equity of funding		3 - To be done	Recommendations in the Funding Allocation Report are under review by the Division
25	Equity funding		3 - To be done	
26	Modify and distribute manuals to reflect changes		2- Partially Completed	All new manuals have been published with the exception of the Service Records Manual.
27	Analyze decisions for fiscal impact on other service systems such as DSS, DJJDP and criminal justice and publish information		4 - Delete	This is beyond the scope of DHHS.
28	Coordinate decisions with office of state budget		1 - Completed	
29	Coordinate decisions with local government commission and association of county commissioners		1 - Completed	
30	Coordinate with controller's office changes for payments		1 - Completed	
31	Coordinate bed day allocation plan for hospitals		1 - Completed	
32	Coordinate bed day allocation plan for ADATCs.		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2003 Tasks			
33	Develop MR centers downsizing plan		1 - Completed	Plan has been completed. However, despite the Division's best efforts, downsizing has not occurred as planned.
34	Coordinate with hospital downsizing plan		1 - Completed	Hospital downsizing plan has been completed. However, demand for hospital services remains high and downsizing has not occurred as planned.
35	Establish funding for LME services based upon cost model		1 - Completed	
36	Establish and modify standards for fund balance requirements		1 - Completed	
37	Establish methodology for service rates to providers		1 - Completed	
38	Publish service rates		1 - Completed	
39	Load and coordinate rate changes and structures with IPRS and MMIS.		1 - Completed	
40	Establish, modify or repeal fiscal requirements such as cost findings.		2- Partially Completed	Revised policy guidance has been issued regarding fiscal policies. Revision of rules and APSM-75 manual are in process.
41	Modify state contracts as needed		1 - Completed	
42	Child mental health plan		1 - Completed	
43	Establish documentation requirements for triage/ screening/referrals		1 - Completed	
44	Establish provider qualifications for all services including case management.		1 - Completed	
45	Develop utilization and authorization protocols (medical necessity determination)		2- Partially Completed	Medicaid completed; authorization guidelines for state funded services to be issues in the first quarter of SFY 2007.
46	Establish provider network requirement including contracts and enrollment		1 - Completed	Note that the term “provider network” has a negative connotation with CMS and is no longer used in North Carolina.
47	Policy decision for direct enrollment		1 - Completed	
48	Policy decision for direct billing		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2003 Tasks			
49	Establish authorization documentation to providers		1 - Completed	
50	Establish authorization and connectivity/documentation to payer		2 - Partially Completed	Working to standardize the forms to be used in this process.
51	Modify state contracts as needed		1 - Completed	
52	Modify, submit and secure approval of HCB waiver		1 - Completed	
53	Development of new waiver(s) and/or technical amendments to an existing waiver		1 - Completed	The decision was made by the TBI Council that a waiver was not the best solution for that population.
54	Coordinate TBI waiver		4 - Delete	
55	Operationalize child mental health plan		1 - Completed	
56	Establish process for operationalization of the CMH Plan		1 - Completed	
57	Implement the CMH Plan		1 - Completed	
58	Modify and publish manuals (services, medical record, waiver, Medicaid, and clinical guidelines)		2- Partially Completed	All new manuals have been published with the exception of the Service Records Manual.
59	Establish and implement training and communications for programmatic products		2- Partially Completed	Final communication regarding trainings approved to meet requirements of new service definitions issued in June, 2006.
60	Coordinate with health choice		1 - Completed	
61	Coordinate with state personnel classification changes		1 - Completed	
62	Establish comprehensive prevention plan		2 - Partially Completed	Division successfully applied for and received a federal Prevention Strategic Infrastructure Grant (P-SIG) which is informing this activity.
63	Comprehensive service implementation plan		1 - Completed	
64	Implementation of construction plan for ADATC acute detox admissions		1 - Completed	Hospital Steering Committee working on this activity. State Operated Services staff continues to work on this project.
65	Develop consolidation plan for hospitals (Dix/Umstead)		2 - Partially Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2003 Tasks			
66	Establish and coordinate uniform and consistent operational policies and practices for all state facilities		2 - Partially Completed	
67	Develop comprehensive quality management and systems evaluation plan		2 - Partially Completed	Overall Quality Management plan completed in SFY 2005.
68	Complete DD best practice		2 - Partially Completed	Will be finalized in first quarter of SFY 2007.
69	Review quality assurance plans in accordance with CMS quality protocol for waivers		1 - Completed	
70	Design uniform portal (designs and access standards for target/ non-target including triage and screening).		1 - Completed	
71	Establish standards and functionality requirements for telephonic connectivity among the State, LMEs and providers		4 - Delete	Upon further investigation, the technology to support this goal is not available. Now that telephone numbers are portable, an automated system that could recognize an area code and redirect the call to the proper LME does not work.
72	Establish triage/ screening protocols		1 - Completed	
73	Establish staff qualification for triage and screening		1 - Completed	
74	Establish referral protocols		1 - Completed	
75	Establish person centered planning standards and documentation elements		1 - Completed	
76	Write service definitions		1 - Completed	
77	Establish state CFAC operations plan		1 - Completed	
78	Establish state and local monitoring requirements including protocols and audits procedures.		1 - Completed	
79	Establish training and communication plan to reflect administrative changes		1 - Completed	
80	Modify and distribute manuals to reflect changes		3 - To be done	All new manuals have been published with the exception of the Service Records Manual.

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2003 Tasks			
81	Integration of information technology between facilities		2 - Partially Completed	The new clinical applications being developed for the new hospital will form the foundation for continuing this effort.
82	Develop an accreditation policy for LMEs and providers		1 - Completed	
83	Establish local CFAC operations plan		1 - Completed	
84	Establish LME director evaluations		1 - Completed	
85	Establish performance contract between LME and state		1 - Completed	
86	Establish provider agreements and or contracts for service providers		1 - Completed	
87	Coordinate network capacity development		2 - Partially Completed	Provider capacity issues will continue to be addressed through the Provider Action Agenda Team, which expands July 1, 2006 to include provider members. With the implementation of the new service definitions and direct enrollment for providers, provider capacity can now be addressed in a more systematic manner.
88	Establish memorandum of agreements between state partners (division and departments)		1 - Completed	
89	Establish technology requirements including but not limited to client data		2 - Partially Completed	Continue to work on developing more web-based solutions for various reporting requirements.
90	Establish telephone connectivity between LME and providers.		4 - Delete	Beyond the scope of DHHS.
91	Establish cohesive service provider appeal system		1 - Completed	
92	Establish cohesive LME appeal system		1 - Completed	
93	Establish cohesive consumer appeal process		1 - Completed	The Commission on MH/DD/SAS has developed rules as required by 2005 legislation.
94	Distribute completed LME cost model and negotiation parameters		1 - Completed	
95	“Seal” model based upon feedback		1 - Completed	

#	State Plan 2003 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
96	Finalize LME payment rates for each LME		1 - Completed	
97	Establish cost allocation, payment and settlement methodology for LME payments		1 - Completed	
98	Policy decision on the benefits package for target and non-target		1 - Completed	
State Plan 2002 Tasks				
1	The Division will oversee the MH/DD/SAS reform effort.	Part 3	1 - Completed	
2	The Division will ensure ongoing implementation of the State Plan.	Part 3	1 - Completed	
3	The Division will ensure that all planning is done in collaboration with all stakeholders.		1 - Completed	
4	The Division will oversee a state-level transition strategy to assist the reform.	Part 3	1 - Completed	
5	The Division will undergo a reorganization to support the MH/DD/SAS State Plan.	1.5	1 - Completed	
6	Division staff will organize and support the Director's Advisory Committee on implementation of MH/DD/SAS reform.		1 - Completed	
7	The Division will create an Office of Advocacy & Customer Services.	Part 2 ??	1 - Completed	
8	The Division will sponsor an annual consumer conference and other conferences as approved by the Director.		1 - Completed	
9	The Division will provide guidance and oversight of meaningful participation/ involvement by consumers/ families at the local policy level.		1 - Completed	This is a work in-progress with the Commission for MH/DD/ SAS. Each year a rulemaking timeline is developed by the Commission and the Secretary of DHHS.
10	The Division will assure appointment of consumers/family members to state-level boards, commissions, advisory bodies, planning groups and other appropriate bodies.		1 - Completed	

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
11	The Division will assure that all statutes, rules and policies that are inconsistent with MH/DD/SAS reform are identified, amended and/or deleted. In cases where federal and/or state statutes cannot be modified or waived, the Division will assure that MH/DD/SAS policy is in compliance.	3(a)(2)	2 - Partially Completed	
12	The Division/ Department will conduct an analysis of the state statutes to ensure congruity with foundations and models of best practice.		1 - Completed	
13	The Division will create a regulatory and policy framework to facilitate MH/DD/SAS reform.		1 - Completed	
14	The Division will develop all statewide contracts necessary to implement MH/DD/SAS reform and ensure that each is processed expeditiously.	3(a)(5)	1 - Completed	
15	The Division will develop a technical assistance/ communication strategy to assist counties with choosing a method of governance.		1 - Completed	
16	The Division will ensure that local business plans are submitted in accordance with reform statute and are consistent with State Plan requirements.	Part 3	1 - Completed	
17	The Division will provide standardized protocols and documents for use by the LMEs to ensure consistency across the state.	1.5(9)	1 - Completed	Division has provided guidance, technical assistance, and funding. However, we do not have statutory authority to force mergers.
18	The Division will provide guidance and oversight to ensure that targets and parameters for consolidation in the reform statute are met.	Part 3	2 - Partially Completed	This is a work in progress. Division continues to offer technical assistance and guidance.
19	The Division will develop and oversee training and technical assistance to assist in development of local management entities.		2 - Partially Completed	This is a work in progress.
20	The Division will oversee the transition from the current local system to a strong LME public management system.		2 - Partially Completed	

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
21	The Division will oversee the implementation of state rules, policies and standards in state facilities.		1 - Completed	
22	The Division will provide adequate monitoring and oversight of state services and facilities.	3(a)(3)	1 - Completed	
23	The Division will facilitate the collaboration between state-operated services and LMEs.	1.6	1 - Completed	
24	The Division will adopt statewide uniform procedures for all facilities to expedite movement of individuals into community.		1 - Completed	
25	The Division will develop and implement category-specific downsizing plans, including strategies for bed/census reductions and community capacity development.		1 - Completed	
26	Psychiatric hospitals will be downsized to meet State Plan requirements.		1 - Completed	
27	The Division will adopt a plan to divert individuals in the substance abuse target population from state psychiatric hospitals.		2 - Partially completed	Renovations are completed to expand detox capacity at R. J. Blackley. Renovations still in progress at J. F. Keith and W. B. Jones.
28	The Division will adopt and implement a plan for decreasing by 50% the long-term census of the state's mental retardation centers (MRCs).		4 - Delete	Division continues to work with consumers, providers, parents to comply with Olmstead ruling implications at the state developmental centers. An arbitrary 50% reduction is no longer seen as viable.
29	The Division will adopt and implement a plan for eliminating state-operated facilities for SED children and youth and expanding System of Care (SOC) in communities.		4 - Delete	System of Care has expanded statewide. Demand for children's inpatient services has continued to be steady. We expect to continue to need inpatient capacity at all three hospitals for the foreseeable future.
30	The Division will approve and monitor performance goals submitted via local business plans (LBPs).	3(a)(5)	1 - Completed	
31	The Division will oversee compliance of LMEs with LBP planning and/or approved local business plans.	3(a)(5)	1 - Completed	

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
32	The Division will manage annual agreements/ contracts with LMEs to govern funding allocations.	3(a)(5)	1 - Completed	
33	The Division will oversee development and management of a new utilization management (UM) system throughout the state.		3 - To be done	Standardized UR processes for Medicaid funded services will be implemented with the implementation of the Value Options process. The Division is still working on standardized authorization criteria for state funded services. Will be finalized early in SFY 2007.
34	The Division will develop disability-specific service/care authorization criteria.		3 - To be done	
35	The Division will oversee system development based on best practice foundations and practice platforms.	1.5(9)	1 - Completed	Note that this will continue to be an on-going process. The Division has established the Practice Improvement Collaborative (PIC) comprised of academics, clinicians, consumers and providers to oversee this process in the future.
36	The Division will provide leadership in transformation to a system with best practices as its foundation.	1.5(9)	1 - Completed	
37	The Division will develop a comprehensive training strategy to support the principles of the State Plan.		2 - Partially completed	Initial training has been conducted on all service definitions and in-depth training is on-going for several of the service definitions.
38	The Division will oversee development, implementation and evaluation of core functions by the LMEs.	1.1	1 - Completed	The Division has defined and offered guidance on these. Ongoing monitoring and a continuous quality improvement process will be on-going.
39	The Division will provide guidance to local communities with respect to building community capacity and resource enhancement.		1 - Completed	The Division has provided guidance. Development of community capacity at the local level will be an on-going process.
40	The Division will develop uniform service definitions to enhance the array of services/supports/ treatment to target populations based on models of best practices in identified essential life areas.	1.5(7)	1 - Completed	
41	The Division will develop uniform practice standards based on models of best practices in essential life areas.	1.5(9)	2 - Partially Completed	The Division has addressed best practices in services and in some life areas, such as housing and work. The PIC will continue this process in other life areas.

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
42	The Division will develop standards and practices to enhance system-wide focus on prevention.		2 - Partially Completed	Division successfully applied for and received a federal Prevention Strategic Infrastructure Grant (P-SIG) which is informing this activity.
43	The Division will design the statewide system of uniform portal (standardized access to services).	1.5(8)	2 - Partially Completed	A standardized screening tool and a standardized assessment tool will be published in the first quarter of SFY 2007.
44	The Division will provide for a single statewide access point to work in tandem with local systems.		4 - Delete	Upon further investigation, the technology to support this goal is not available. Now that telephone numbers are portable, an automated system that could recognize an area code and redirect the call to the proper LME does not work.
45	The Division will institute access system performance standards.		1 - Completed	
46	The Division will develop reporting procedures regarding access.		1 - Completed	
47	The Division will develop and execute a comprehensive quality management (QM) system focusing on continuous quality improvement.		2 - Partially Completed	Ongoing
48	The quality management system will be outcome-based.		2 - Partially Completed	Ongoing
49	The Division will develop performance indicators for all levels of the system to be included in the quality management process.		2 - Partially Completed	Process of refining performance measures in ongoing.
50	The Division will develop measurement criteria for models of best practice to be included in QM system.		2 - Partially Completed	Now that we have finally received CMS approval of the new service definitions and have been able to implement evidence-based best practices, we will begin process of developing mechanisms and tools for monitoring providers for fidelity to the evidence-based models.
51	The Division will develop a monitoring and oversight process as part of the QM system.	Part 2	1 -Completed	
52	The Division will incorporate consumer rights, protections, appeals and grievances into the overall QM system.	3(a)(2)	2 - Partially Completed	This has been completed for consumer rights and critical incidents. Incorporation of complaints and appeals is in progress.

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status:	Outcome
			1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	
53	The Division will establish competency requirements for all segments of the mh/dd/sa workforce.		4 - Delete	Training required by services definitions has taken a different track from what was envisioned in 2002.
54	The Division will manage a comprehensive training and education strategy to support the new quality management system.		4 - Delete	DMH/DD/SAS does not have sufficient infrastructure to “manage a comprehensive training and education strategy.” We have developed requirements around provider training that we believe accomplishes this goal.
55	The Division will conduct internal evaluations of state performance for public review.		2- Partially completed.	In the process of developing performance criteria to measure internal performance. The first semi-annual report on system performance was provided to the LOC October 2006.
56	The Division will create a methodology for conducting continuous quality improvement (CQI) for state operations.		1 - Completed	
57	The Division will participate in national studies and evaluations.		1 - Completed	An ongoing activity.
58	The Division will explore opportunities for additional external review.		1 - Completed	The new service definitions and the LME contract require services providers and LMEs to be subject to review by national accrediting bodies.
59	The Division will create a performance based contracting system.		1 - Completed	
60	The Division will evaluate the efficacy of statewide utilization management (UM).	1.5(12), 3(a)(4)	1 - Completed	Division strongly supports statewide UM and is in the process of implementing that standardization.
61	The Division will create the framework for building a financial strategy to support reform.		3 - To be done	Recommendations in the Funding Allocation Report are under review by the Division.
62	The Division will maximize the use of all funding sources.	1.5(12)	1 - Completed	
63	The Division will develop the capacity to convert funding from institutional programs for use in community settings.		1 - Completed	
64	The Division will manage and oversee transition to a system of fair and equitable resource allocation methodology.		3 - To be done	Recommendations in the Funding Allocation Report are under review by the Division.

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
65	The Division will institute independent cost modeling of new system functions.		1 - Completed	
66	The Division will establish state-level procedures to enable fiscal reform.		3 - To be done	
67	The Division will redesign its fiscal policies and practices as necessary to support best practices.	1.5	1 - Completed	
68	The Division will oversee the implementation of the Integrated Payment and Reporting System (IPRS).		1 - Completed	
69	The Division will implement and oversee the new Decision Support System.		1 - Completed	
70	The Division will develop and implement a plan for seamless electronic communication systems across agencies and qualified providers.		3 - To be done	Clinical applications being designed for the new hospital will form the baseline for this activity.
71	The Division will provide leadership in use of technology to improve the mh/dd/sa system and support to individual users.		1 - Completed	
72	The Division will provide technical guidance and/or leadership in selection/ development of a consumer centered, outcome focused electronic health record system.		3 - To be done	The Division participated in the HIS system development.
73	The Division will ensure local compliance with state and federal technology and data standards, with special emphasis on compliance with HIPAA standards.		1 - Completed	
74	The Division will oversee the continued technological developments at the local level.		1 - Completed	
75	The Division will participate in and/or create new partnerships with state agencies to facilitate reform.	1.5(9)	1 - Completed	
76	The Division will enhance existing joint efforts in the areas of training and education.		1 - Completed	

#	State Plan 2002 Tasks	Section of Session Law 2001-437	Status:	Outcome
			1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	
77	The Division will participate in departmental level initiative to address workforce issues in human services.		1 - Completed	
78	The Division will increase participation in the Long Term Care Cabinet.		1 - Completed	
79	The Division will engage in cross- departmental strategies to address prevention issues consistent with the State Plan.		3 - To be done	Division successfully applied for and received a federal Prevention Strategic Infrastructure Grant (P-SIG) which is informing this activity.
80	The Division will work with the Division of Facility Services (DFS) to modify licensure statutes, rules and practices to promote best practices.		2 - Partially Completed	This is a work in-progress with the Commission for MH/DD/ SAS (not DFS). All rules that need to be deleted have been identified and revised rules are in progress.
81	The Division will initiate collaborative efforts to improve the linkage between MH/DD/SAS and primary health care.		1 - Completed	
82	The Division will work with DHHS staff and Office of State Personnel to address implications of reform on the state/ local public workforce.		1 - Completed	
83	The Division will oversee collaborative efforts to help de-construct the existing silos (an agency practice of operating without input or involvement of other agencies or parts of agencies).		1 - Completed	
84	In collaboration with appropriate state agencies, state and local media, LMEs and advocacy organizations, the Division will increase awareness of the mh/dd/sa reform effort and the new system that is envisioned.		2 - Partially Completed	
85	In collaboration with LMEs, advocacy and consumer organizations, the Division will create a local development strategy to engender support for the new system and promote the vision of people with disabilities as full citizens of their communities.		1 - Completed	

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
1	Initiate plan to coordinate policies and planning with other divisions to address administrative and business functions, funding sources, as well as programmatic & clinical guidelines, outcomes and initiatives		1 - Completed	
2	Provide initial report to Legislative Oversight Committee on state plan, and quarterly thereafter on each required activity listed below.		1 - Completed	
3	Submit the State MH/DD/SAS Plan to the Legislative Oversight Committee	1.5, 3(1)(a)	1 - Completed	
4	Review of rules and statutes inside and outside DHHS	3(a)(2)	1 - Completed	
5	Review oversight & monitoring functions implemented by DHHS	3(a)(3)	1 - Completed	
6	Report on development of service standards, outcomes, financing formula for core and targeted services, to prepare for their admin, financing & delivery by area authorities/ county programs	3(a)(4)	1 - Completed	
7	Develop format & required content for business plans submitted by boards of county commissioners & for contractual agreements between DHHS & area authorities/ county programs	3(a)(5)	1 - Completed	
8	Assessment of DHHS readiness for reform implementation	3(a)(6)	1 - Completed	
9	Expand service capacity for substance abusers to assist in diversion from state psychiatric hospitals		2 - Partially Completed	Renovations to expand detox capacity at ADATCs completed at R.J. Blackley ADATC. Still in process at J. F. Keith and W. B. Jones.
10	Division of Facility Services to give priority consideration to construction on projects related to the development of service capacity		4 - Delete	DFS must follow the requirements of the State Medical Facilities Plan and timelines.
11	DHHS personnel to expedite additional staffing needs of Alcohol & Drug Abuse Treatment Centers (ADATC)		3 - To be done	Capital projects have experienced delays. Units slated to open in SFY 2007. When funding appropriated by the GA, DHHS HR will establish and level positions.

#	State Plan Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
12	New Director of MH/DD/SAS announced		1 - Completed (twice!)	
13	DD to convene workgroup to build plan for integrating private Intermediate Care Facilities/MR into unified community-based system		1 - Completed	Although DD section no longer exists, new unified way of determine ICF/MR Level of Care through Murdoch Center does integrate community ICFs/MR into standard practice.
14	Prepare, with the County Commissioner's Association, a technical assistance/communication plan for decision regarding Letters of Intent.	3(a)(8)	1 - Completed	This was in anticipation of the catchment area consolidation plan that was submitted by the Secretary on 1/1/2005.
15	Distribute revised service record manual to field staff for review		3 - To be done	Currently being finalized.
16	Submit a research waiver for consumer directed services for people with developmental disabilities		2 - Partially completed	CMS has changed the process and this goal is no longer obtained through a research waiver; it is now a Home and Community Based waiver. DMH/DD/SAS has prepared a waiver application that is currently under review by DMA.
17	Revise service definitions for July implementation of Integrated Payment & Reporting System (IPRS) statewide rollout & establish plan for implementation	3(a)(4)	1 - Completed	
18	Submit changes to Medicaid Plan & coordinate with Health Choice & state funding as needed	1.5	1 - Completed	
19	Promulgate rules & publication of activities as required by the rule-making authority (G.S. 150B) & new Medicaid legislation		1 - Completed	Completed for what was envisioned in State Plan 2001; however, rule-making is an on-going process.
20	Analyze financial impact		1 - Completed	
21	Begin training of staff & field staff		1 - Completed	
22	Set rates for new services		1 - Completed	
23	Electronic Data Systems (EDS) & IPRS programming		1 - Completed	
24	Begin establishment of licensure rules through MH Commission on MH/DD/SAS for prevention program		2 - Partially Completed	Prevention services still being designed. Also plan to pursue elimination of licensure for outpatient SA services.

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status:	Outcome
			1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	
25	Develop criteria for qualified prevention professional		1 - Completed	
26	Based on Olmstead assessments, analyze services needed to facilitate discharge of patients from state hospitals and reduce admissions to such hospitals.		2- Partially completed	Consumers have been discharged and consumers needing the services they were receiving are no longer being admitted to hospitals. However, overall admissions have increased due to increase in population, decrease of community hospital capacity and SA admissions.
27	Complete annual public review of plan		1 - Completed	
28	Complete annual public review of plan		1 - Completed	
29	Establish outpatient crisis teams from state facilities to develop re-integration plans		4 - Delete	Decision was made that these teams did not need to be housed in state facilities; community providers are capable of delivering the services envisioned.
30	Report to Appropriations Committee finding of Section 21.28A of Senate Bill 1005, Traumatic Brain Injury Waiver		1 - Completed	
31	Implement plan to divert substance abuse admissions from state psychiatric hospitals		3 - To be done	Plan has not been implemented since capital projects to create detox capacity in ADATCs have taken longer than anticipated.
32	Complete renovation of 3 ADATCs for 90 additional beds		2 - Partially Completed	Renovations completed at R.J. Blackley ADATC. Still in process at J. F. Keith and W. B. Jones.
33	Recruit & hire staff for 90 additional beds		2 - Partially Completed	Staff hired for Blackley. Staff will not be hired at Keith and Jones until renovations completed.
34	Develop multilevel integrated quality management committee structure including consumers, families and other stakeholders		2 - Partially Completed	This is an on-going process.
35	Develop and/or strengthen collaborative agreements with community college systems, DPI, colleges and universities, Area Health Education Centers & associated training vendors to establish training for state plan, best practices including cultural competence		1 - Completed	

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
36	Develop & present funding needs for competency programs		4 - Delete	Training required by service definitions has taken a different track from what was originally envisioned in 2001.
37	Complete content competencies for each curriculum & establish inter-rater reliability		4 - Delete	
38	Complete 1 through 5 year financing plan to support mission core services, target populations, LME functions, state functions, bed-day allocations, mental retardation center downsizing, leveraging funds from state facilities & Mental Health Trust Fund	3(a)(4)	3 - To be done	
39	Review current allocations of state funding to area authorities/county programs & recommend changes in methods & formulae to ensure equitable distribution of state funds & evaluate means of increasing/realigning funding to stabilize & support MH/DD/SAS	3(a)(4)	3 - To be done	
40	Develop accurate picture of current resource allocation in the MH/DD/SAS System including current methods of funding & disparities	1.5, 3(a)(4)	3 - To be done	
41	Develop a realignment plan of state facility resource		1 - Completed	
42	Develop a dedicated source of ongoing of state & federal funding for the system		4 - Delete	
43	Examine ways to obtain additional funding through traditional/non-traditional means		2 - Partially Completed	
44	Complete analysis and make recommendations for direct/indirect cost of qualified public/private providers		1 - Completed	DMH/DD/SAS does not have the ability to develop state or federal funding sources. That is dependent upon the appropriating bodies.
45	Develop criteria & operational procedures for the Consumer Advocacy Program	Part 2	1 - Completed	
46	Develop the DHHS Appeals Panel for clients and family members, as well as qualified providers	3(a)(7)	1 - Completed	Panel appeal rules have been enacted.

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
47	Evaluate consolidation of the Quality of Care Consumer Advocacy Program w/other consumer advocacy/ombudsman programs in DHHS and report to the LOC. Include Consumer Advocacy Programs, Office of Consumer Affairs		1 - Completed	Evaluation was completed but never submitted to LOC, since they had not requested it to be.
48	Establish training & promotion strategies for state plan		1 - Completed	
49	Present integration of the Olmstead, Long-term Care & State MH/DD/SAS plans		4- Delete	Other plans have legislative language requiring them to remain separate plans.
50	Review financing options for interpretation/translation services to people being served and make specific recommendations		1 - Completed	
51	Initiate expansion of community support services for adults with mental illness in order to facilitate closure of state hospital beds.	1.1	1 - Completed	
52	Provide financial and/or technical assistance to LME's to enhance service development/provision to the adult mental health target population.	3(a)(5)	1 - Completed	
53	Complete analysis and make recommendations for direct/indirect cost of qualified public/private providers	1.5	1 - Completed	
54	Open admissions at 3 ADATCs to involuntary substance abuse admissions		1 - Completed	
55	Adopt a standardized assessment & treatment protocol and provide regional training to area authority/county program and ADATC staff in order to carry out diversion of substance abuse clients to state hospitals		2 - Partially Completed	Completed for Blackley since renovations complete. To be done at Keith and Jones when detox capacity comes on line.
56	Present recommendations regarding expansion of direct enrollment of qualified providers & possibly agencies		1 - Completed	
57	Complete annual State Plan modification	1.5, 3(1)(a)	1 - Completed	
58	Update all Memoranda of Agreement (MOA) for July implementation		1 - Completed	

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
59	Complete data gathering and analysis related to geographic (catchment) area consolidation plan	3(a)(8)	1 - Completed	
60	Complete review of state plan for FY 02-03 implementation	1.5, 3(1)(a)	1 - Completed	
61	Submit quarterly report for LOC on status of state plan implementation		1 - Completed	
62	Increase target populations of children w/severe impairment & their families to be served through SOC		1 - Completed	
63	FY 2002-6000 youth/families (doubling 3,000 baseline of youth served in System Of Care (SOC) currently eligible for At Risk SOC in 100 counties)		4 - Delete	SOC has been expanded statewide. Arbitrary numerical goals were not supported by data.
64	Establish annual 5 year benchmarks to: 1) strengthen school counseling programs, primary care linkage & qualified provider networks through SOC approach for 253,407 with mild/moderate impairment; 2) incorporate prevention through SOC targeting 1,851,191 y		2 - Partially completed	Linkage to primary care and SOC goals is ongoing process.
65	Assess with Community Collaborative the current service array & gaps in services to establish baseline		1 - Completed	Assessment included in Long-Range Plan Study.
66	Develop local services to reduce the number of children in state hospitals, DSS custody & Youth Development Centers	1.1	1 - Completed	
67	Increase capacity using 3% of Child Mental Health funds pool (approx. 1.5 million) for comprehensive treatment services special provision to children with highly complex needs		1 - Completed	
68	SOC for children At Risk or already out-of home operational in 30 counties		1 - Completed	
69	Refine collaborative plan with other child-serving agencies/communities to expand resources through integration of services		1 - Completed	
70	Increase/add resources for CMH at the community level at 25%		4 - Delete	Requires additional appropriations. Goal is laudable; firm numerical target is unrealistic.

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2001 Tasks			
71	Recommend integrated SOC structure that includes JCPC through legislation/executive order to reduce duplication		1 - Completed	
72	Establish flexible funds & voucher resources across all disabilities		4 - Delete	Requires legislative action; no current support.
73	Modify CAP/MR-DD waiver to expand community-based services		1 - Completed	
74	Initiate rule revisions on an ongoing basis as systems & policies are implemented	3(2)(a)	1 - Completed	
75	Eliminate 72 state psychiatric hospital beds & transfer patients to community		1 - Completed	
76	Dix Hospital 39 beds-close Wright Building		1 - Completed	
77	Broughton Hospital 18 beds-close nursing facility		1 - Completed	
78	Umstead Hospital close 15 gero-psychiatry beds		1 - Completed	
79	Systematically and on ongoing basis, redirect funds from state hospitals to community services for substance abuse, mental health, child mental health to expand community services		1 - Completed	
80	Prepare Eastern Adult Treatment Program, Whitaker & Wright Schools for Medicaid certification		4 - Delete	EATP closed. Physical plants at Wright and Whitaker cannot be cost-effectively made to meet CMS requirements (State does not even own Wright School property).
81	Develop cross agency policy recommendations for statewide outcomes based SOC best practices consistent with state plan		1 - Completed	
82	Implement comprehensive outcome measurement plan with elements across agencies and develop framework for outcome report cards	3(a)(4)	3-C	Quality Management Team working with stakeholders to develop appropriate system- and provider-level reports.
83	Implement SA standardized risk assessment protocol and pilot use in 10 communities		4 - Delete	NC TOPPS informing development of risk assessment. When complete, will be rolled out statewide, not piloted.

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
84	Develop 2 pilot projects from ICF-MR homes to community support using CAP-MR/DD funds		4 - Delete	New CAP-MR/DD waiver facilitates movement from community ICFs/MR to CAP waiver. No need to pilot, is working statewide.
85	Mental retardation centers & private sector develop 5- bed homes in community for those person previously unsuccessful in community placements		4 - Delete	Decision has been made that state developmental centers will not be developing community-based services at this time.
86	HB 1395 Transfer-ICF-MR beds to transfer at least 40 people from mental retardation centers to community ICF-MR beds		3 - To be done	HB 1395 transfers were "on hold" for a number of years. DHHS has now decided to revisit the issue and begin pursuing this option in the future.
87	Develop & operate three 12-bed specialized MR/MI units one for children, two for adults in each of the 3 MRCs to serve moderate to severe MR & MI for crisis intervention, diagnosis & treatment		4 - Delete	Further research has not supported this level of increased institutional capacity. SOS is working with developmental centers to identify need for MR/MI capacity.
88	Convert Black Mountain Center ICF-MR beds to Skilled Nursing Facility to serve aging persons with DD & medical care needs		1 - Completed	
89	Develop MH/DD/SA protocols based on evidence-based practices and/or national standards of service delivery		1 - Completed	
90	Develop service definitions consistent with evidence-based services/expert consensus	1.5(9)	1 - Completed	
91	Update clinical guidelines for client assessment, schizophrenia, mood disorders, substance related disorder and psychiatric issues in persons with MR		2 - Partially Completed	Design and implementation of new service array caused this deliverable to be put on the back burner. Best Practice Team now revisiting.
92	Making use of Robert Wood Johnson/SAMHSA and other national tool kits as appropriate, review & evaluate standards on person-centered planning, cultural competence, Assertive Community Treatment, psychiatric rehabilitation and case management for adults		1 - Completed	
93	Develop specs for DHHS management information system including decision support & build upon Medicaid MIS & IPRS for DHHS coordination; manage coordination at department level		1 - Completed	

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
94	Develop Memoranda Of Agreement between state & local agencies including qualified provider enrollment agreement and qualified provider/LME agreements		1 - Completed	
95	Establish local monitoring protocols for use by LME & credential local auditors; coordinate with Division of Facility Services licensure review including relationship with national accreditation & deemed status	3(a)(9)	1 - Completed	
96	Establish Office of Consumer Affairs that is consistent with Division reorganization		1 - Completed	
97	Develop readiness plan for conducting reviews & certifying area authorities/county programs as LME's.		1 - Completed	
98	Reduce child out-of-state placements by 25%		1 - Completed	
99	Promote increased flexibility of child-serving funds-develop mechanisms in 100 counties to de-categorize 1-5% of child-serving agency funds		4 - Delete	DMH/DD/SAS has allowed LMEs to decategorize up to 10% of CTSP funds. Funding for other agencies is beyond the scope and authority of DMH/DD/SAS.
100	Establish regional learning center-engage university & community college systems with team of specialists of trainers in each region for TA in best practices and trouble-shooting. One center per year for 4 years		4 - Delete	DMH/DD/SAS does not have sufficient infrastructure to operate regional training facilities.
101	Identify all existing outcome tools and data collection efforts across agencies that can contribute to one integrated data set to measure indicators regarding specified outcome targets		4 - Delete	DMH/DD/SAS is developing outcome tools and measurement processes. Measurement of outcomes by other agencies is beyond the scope of the Division.
102	Present quarterly report to the LOC on the status of State Plan implementation		1 - Completed	
103	Receive and act on letters of intent from counties regarding LMEs	3(a)(8)	1 - Completed	
104	Develop criteria for performing Utilization Management including centralized functions & LME functions		1 - Completed	
105	Develop budget & fee structure for UM functions		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2001 Tasks			
106	Develop criteria for measuring the performance of the UM entity on an ongoing basis		1 - Completed	
107	Begin process for the selection of a vendor		1 - Completed	
108	Determine process & content of UM information to state & LME	3(a)(4)	3 - To be done	Working with the Division of Medical Assistance and ValueOptions to develop reports and formats.
109	Present quarterly report to the LOC on the status of state plan implementation		1 - Completed	
110	Develop and maintain a mh/dd/sa competency, education and training system that is coordinated among system members & is based on best practices including cultural competence, professional competencies, and performance standards		4 - Delete	Training required by service definitions has taken a different track from what was originally envisioned in 2001.
111	Develop & maintain a workforce that is reasonably compensated		4 - Delete	Beyond the scope of DHHS. We can establish services rates but we cannot dictate to private providers how much they pay their staff. Market forces control that. We can also require certain training as a compliance measure, but cannot dictate types of voluntary staff development activities.
112	Develop & periodically update career enhancement procedures for the MH/DD/SA system		4 - Delete	
113	Perform regular salary reviews to ensure a workforce that is reasonably compensated at the local community level (public & private)		4 - Delete	
114	Each area authority/county program submits their proposed business plan to the DHHS Secretary	3(a)(8)	1 - Completed	
115	Establish licensure categories for agencies providing non-facility based services & begin rule making		4 - Delete	Working to eliminate licensure requirements for non-facility based services.
116	Create separate Home and Community Based (HCB) waiver for persons leaving institutions		4 - Delete	Guidance from CMS and experiences in other states indicate this is not a viable plan.
117	Reduce alcohol, tobacco & other drugs (ATOD) usage by children between the ages of 12-17		4 - Delete	We have reduced this, however, this is an ongoing goal which cannot be achieved in a two-year period of time.

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
118	Work with Center for Substance Abuse Prevention to identify a menu of approved prevention services		1 - Completed	
119	Develop prevention service system, definitions, staff competencies & outcome criteria		1 - Completed	
120	Initiate negotiations with Medicaid & other payers to establish rates & approve reimbursement for prevention services in NC		3 - To be done	DMH/DD/SAS successfully applied for and received a federal Prevention Strategic Infrastructure Grant (P-SIG) which is informing this activity.
121	Complete annual public review of plan	1.5, 3(1)(a)	1 - Completed	
122	Establish a 24-bed substance abuse crisis triage unit and complementary intensive outpatient program for Wake County		4 - Delete	Wake County chose to concentrate on creating inpatient capacity.
123	Identify & renovate an appropriate facility		4 - Delete	
124	Recruit & hire staff		4 - Delete	
125	Evaluate progress in development and implementation of seamless electronic communication systems across agencies and qualified providers (MMIS/IPRS, etc.)		2 - Partially Completed	Clinical applications being designed for new hospital will form the baseline for this activity.
126	Complete annual plan modification	1.5, 3(1)(a)	1 - Completed	
127	Present quarterly report to the LOC on the status of the State Plan implementation		1 - Completed	
128	Re-engineer home & community-based waiver services to reflect Human Service Research Institute recommendations		1 - Completed	
129	Continue expansion of local community child and adolescent service array increasing resources at the community level by 35%		4 - Delete	Dependent upon increased funding by the General Assembly.
130	Continue rollout for county integrated child SOC to cover 50 counties		1 - Completed	

#		Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
	State Plan 2001 Tasks			
131	Increase target population of children with severe impairment to be served by SOC to build capacity for 18,000 youth/families		1 - Completed	
132	The Secretary shall complete certification of 1/3 of area authorities/county programs as LME's	3(a)(8)	1 - Completed	
133	Develop statewide contract for referral system component for Uniform Portal		1 - Completed	
134	Reduce additional 154 adult state hospital beds & substitute with community based services including pilot projects for specialized residential services, community nursing facilities, and other supports		1 - Completed	
135	Rollout a reimbursable substance abuse prevention benefit for 1,500 children and their families		4 - Delete	Dependent upon funding.
136	Establish 2nd of 4 regional learning centers to provide ongoing TA & troubleshooting for system		4 - Delete	DMH/DD/SAS does not have sufficient infrastructure to operate regional training facilities.
137	Refine comprehensive outcome plan including common elements from other agencies for cross-agency outcome report cards.		3-Completed	Work on reporting DMH/DD/SAS outcomes ongoing.
138	Complete research & development of uniform set of funding band criteria to transition to a new resource allocation system		1 - Completed	
139	Present quarterly report to the LOC of the status of the state plan implementation		1 - Completed	
140	DHHS Secretary shall complete certification of two-thirds of the area authorities/county programs as LME's	3(a)(8)	1 - Completed	
141	Complete annual public review of plan	1.5, 3(1)(a)	1 - Completed	
142	Present quarterly report to the LOC on status of state plan implementation		1 - Completed	

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
143	Develop 5 additional community based substance abuse crisis triage units with Intensive Outpatient treatment programs		4- Delete	Initial state plan envisioned that DMH/DD/SAS would develop these programs. We are currently working with LMEs and providers to develop them locally.
144	Complete annual plan modification	1.5, 3(1)(a)	1 - Completed	
145	Present quarterly report to the LOC on the status of state plan implementation		1 - Completed	
146	Continue cross-agency approaches to comply with Olmstead and comprehensive treatment program special provision by reducing out-of-state child placements 75%		1 - Completed	
147	Reduce number of children inappropriately in state hospitals, DSS custody and youth development centers by redirecting funds from state hospitals to established local & semi-regional alternatives to increase by 25%		3 - To be done	Demand for children's inpatient services has continued to be steady so units have not been able to be downsized. We anticipate that new services that became effective 3/20/06 will begin to impact this demand positively.
148	Continue rollout schedule for counties to use SOC to 70 counties		1 - Completed	
149	Increase target population of children with severe impairment to 36,000 youth/families		1 - Completed	
150	Reduce ATOD use by children 12-17 by standardized data collection for measuring outcomes and to begin risk profiling of this group		4- Deleted	
151	Continue to reduce state hospital placements for children by establishing 4 regional assertive community treatment teams in conjunction with 4 semi-regional psychiatric hospitals		4 - Delete	ACTT is not an evidence-based practice for children. New services implemented 3/20/06 include Intensive In-Home and Multi-Systemic Therapy which are evidence-based practices appropriate for children.
152	Continue to increase/add resources for child community service array by 50% and SOC for children & youth operational in 80 counties		1 - Completed	
153	Establish number 3 out of 4 regional learning centers to provide ongoing TA and trouble shooting for statewide system		4 - Delete	DMH/DD/SAS does not have sufficient infrastructure to operate regional training facilities.

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
154	DHHS Secretary shall complete certification of all area authorities/county programs as LME's	3(a)(8)	1 - Completed	
155	Eliminate additional 212 state adult hospital beds		1 - Completed	
156	Integrate & refine community planning based on state plan		1 - Completed	
157	Expand specialized nursing bed capacity by 20 beds at 4 sites		2 - Partially Completed	One pilot is currently operating to determine the cost-effectiveness of this proposal.
158	Expand specialized residential service with 12 beds at 6 sites		4 - Delete	12 bed group homes are not best practice. They continue to perpetuate the notion of segregating and congregating individuals with disabilities. Providers developed alternative living arrangements for consumers being discharged from state hospitals and DHHS continues to work to expand housing options in inclusive settings.
159	Place 60 people in community programs based on Olmstead assessments		3 - To be done	Downsizing of state Developmental Centers has not occurred as planned, despite efforts of DMH/DD/SAS.
160	Present quarterly report to the LOC on the status of state plan implementation		1 - Completed	
161	Present statewide system report card covering the plan implementation, client outcomes and system reform		2 - Partially Completed	Quality Management Team is developing appropriate system- and provider-level reports. The first semi-annual report on system performance was provided to the LOC October 2006.
162	Present quarterly report to the LOC on the status of State Plan Implementation		1 - Completed	
163	Present the Secretary's area authority/county program consolidation plan to the LOC	3(a)(8)	1 - Completed	
164	Complete annual public review of plan	1.5, 3(1)(a)	1 - Completed	
165	Present quarterly report to the LOC on the status of the state plan implementation		1 - Completed	
166	Develop 10 additional community step down residential alternatives with Intensive Outpatient Program for substance abusers		4 - Delete	Initial state plan envisioned that DMH/DD/SAS would develop these programs. We are currently working with LMEs and providers to develop them locally.

#	State Plan 2001 Tasks	Section of Session Law 2001-437	Status: 1 - Completed 2 - Partially Completed 3 - To be done 4 - Delete	Outcome
167	Complete annual plan modification	1.5, 3(1)(a)	1 - Completed	
168	Present quarterly report to the LOC on the status of the state plan implementation		1 - Completed	
169	SOC for children shall be operational in all 100 counties		1 - Completed	
170	Continue to reduce children in state hospitals, DSS custody and youth development center by re-directing funds from state hospitals to local and semi-alternative regional alternatives		3 - To be done	Demand for children's inpatient services has continued to be steady so units have not been able to be downsized. We anticipate that new services that became effective 3/20/06 will begin to impact this demand positively.
171	State plan should be substantially implemented with continuing build-up of service array of SOC, evidence-based practices, ongoing indices accomplishment and areas of improvement		1 - Completed	
172	Strategies and schedules for implementing a phased in plan to eliminate disparities in the allocation of state funding across county programs and area authorities	1.5	3 - To be done	Recommendations in the Funding Allocation Report are under review by the Division.
173	The total number of area authorities and county programs shall be reduced to no more than 20		4 - Delete	Secretary's plan submitted to LOC on 1/1/2005 no longer adheres to goal of 20 LMEs.
174	Persons served in mental retardation centers reduced 50%		4 - Delete	Downsizing of state Developmental Centers has not occurred as planned, despite efforts of DMH/DD/SAS. Current evaluation of projected capacity needed exceeds 50% of current beds. This goal was not realistic.



State of North Carolina • Michael F. Easley, Governor
 Department of Health and Human Services • Carmen Hooker Odom, Secretary
 Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
 Mike Moseley, Division Director
www.ncdhhs.gov/mhddsas
www.ncdhhs.gov

N.C. DHHS is an equal opportunity employer and provider. 03/07